2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J67423

City-St-Zip:

INVERNESS, FL 34450 US

Entity Name: JON FRANKEL, M.D., P.A.

FILED Mar 22, 2007 Secretary of State

Current Princi	pal Place o	f Business:	New Principal Place of	New Principal Place of Business:	
407B WEST HI INVERNESS, F		LVD. US			
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
5130 SOUTH P INVERNESS, F		VE US	5130 S. POINTE DRIVE INVERNESS, FL 34450	US	
FEI Number: 59-2	775377	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Add	iress of Cu	rrent Registered Agent:	Name and Address of N	e and Address of New Registered Agent:	
FRANKEL, DEI 5130 S POINTE INVERNESS, F	EDR.	ESQ US			
The above nam in the State of F		bmits this statement for the pu	urpose of changing its registered o	office or registered agent, or both,	
SIGNATURE:					
Electronic Signature of Registered Agent			nt	Date	
Election Campaig	n Financing 1	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
	ES () D ANKEL, JON P ' B. HIGHLAND		Title: (Name: Address:) Change () Addition	

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears

SIGNATURE: JON FRANKEL MD PRES 03/22/2007

above, or on an attachment with an address, with all other like empowered.